

EXHIBIT B

Application for Certificate of Authority to Transact Business in Illinois

Form **LLC-45.5**

January 1999

Jesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 359, Howlett Building
Springfield, IL 62756
<http://www.sos.state.il.us>

Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order, payable to "Secretary of State."

Illinois Limited Liability Company Act

Application for Admission to Transact Business

Submit in Duplicate

Must be typewritten

This space for use by Secretary of State

Date

Assigned File #

Filing Fee **\$400**Penalty **\$**Approved: **\$**This space for use by
Secretary of State

1. Limited Liability Company name: Ascendtel, LLC
(Must comply with Section 1-10 of ILLCA or article 2 below applies.)

2. The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: _____
(If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)

3. Federal Employer Identification Number (F.E.I.N.): 36-4430418

4. Jurisdiction of Organization: Illinois

5. Date of Organization: 03-14-2001

6. Period of Duration: 100 years
(See #14 on back)

7. The address, including county, of the office required to be maintained in the jurisdiction of its organization, or if not required, of the principal place of business (Post office box alone and c/o are unacceptable):

524 15th St.
(Number) (Street) (Suite)
Moline IL 61265 Rock Island
(City/State) (ZIP Code) (County)

8. Registered agent: Kristina Dawn Harris
(First Name) (Middle Name) (Last Name)

Registered Office: 524 15th St.
(Number) (Street) (Suite #)

(P.O. Box or c/o Moline Rock Island Illinois 61265
are unacceptable) (City) (County) (ZIP Code)

9. The date on which this foreign LLC first did business in Illinois: _____

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10. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

Competitive Local Exchange Carrier
Business Code # 513300

11. The limited liability company is managed by:
☐ manager(s)
☒ vested in member(s)
12. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.
13. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.
14. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.
15. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated April 24, 2001.
(Month/Day) (Year)

Kristina D. Harris
(Signature)
(Signature must comply with Section 5-45 of ILLCA)

Kristina D. Harris President
(Type or print name and title)

*(If applicant is a company or other entity, state name of company
and indicate whether it is a member or manager of the LLC.)

*Please refer to Sections 178.20(d) and (e) of the Administrative Rules